

Substitute for form 1449/PTO (Revised 07/2007) INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			Complete if Known		
			Application Number	10/792,175	
			Filing Date	March 3, 2004	
			First Named Inventor	Finke-Anlauff et al.	
			Art Unit	2175	
			Examiner Name	K. D. Vu	
Sheet	1	of	8	Attorney Docket Number	042933/275300

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Examiner Initials*	Cite No.	Document Number Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear
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Sheet	2	of	8	Attorney Docket Number	042933/275300

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Sheet	3	of	8	Attorney Docket Number	042933/275300

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Sheet	4	of	8	Attorney Docket Number	042933/275300

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				Examiner Name		K. D. Vu	
Sheet	6	of	8	Attorney Docket Number		042933/275300	

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		*Abstract only				

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Sheet	7	of	8	Attorney Docket Number	042933/275300

OTHER DOCUMENTS			
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s) , volume-issue number(s), publisher, city and/or country where published.	English Language Translation Attached
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Sheet	8	of	8	Attorney Docket Number	042933/275300

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